



# COUNTY of SUSSEX

## Manufactured Home/Industrialized Building Application

**Applicant:** \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work/Cell \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Email: \_\_\_\_\_

**Location of work:** Is this location a manufactured home park? ☐ YES, ☐ NO

Tax ID # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, Virginia Zip \_\_\_\_\_

**Description of Unit:**

Manufacturer: \_\_\_\_\_ Value: \$ \_\_\_\_\_

☐ Singlewide ☐ Doublewide ☐ Other

Overall Dimension: \_\_\_\_\_ X \_\_\_\_\_ Year of Manufacture: \_\_\_\_\_

**Dealer's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

License Number: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

**Installer's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

License Number: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

**Mechanics Lien Agent:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

## **Manufactured (Double or Single Wide) Home** **Required Information**

### **Two copies of the following are required to accompany the completed application**

- |  |                                   |                              |
|--|-----------------------------------|------------------------------|
| - Zoning Permit (1)                            | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Site Plan (1)                                | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Private Sewage Disposal Permit (1)           | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Water &/or Sewer Tap Fee Receipts (1)        | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Skirting Detail                              | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Construction Details for Decks & Porches (3) | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - HUD Installation Disclosure to Customer Form | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |

### **Set-up / Installation Manual with, but not limited to the following**

- |  |                                   |                              |
|--|-----------------------------------|------------------------------|
| - Footing Design (1)(2)                  | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Foundation Plan (2)                    | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Anchorage Detail (2)                   | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |
| - Marriage Wall / Connection Details (2) | <input type="checkbox"/> Provided | <input type="checkbox"/> N/A |

I, \_\_\_\_\_, hereby certify all documents indicated above are included with this  
Print Name  
application. I understand that these documents need to be on the job site when calling for an inspection or I will  
be assessed a \$50 re-inspection fee that shall be paid prior to any re-inspection being performed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby certify that I have the authority to make the foregoing application and that the application, to the best of my  
knowledge, is complete and correct and that the permitted construction will conform to the regulations of the Uniform  
Statewide Building Code and all applicable Ordinances.

Signature (\*) \_\_\_\_\_ Date \_\_\_\_\_

<b>GENERAL CONTRACTOR:</b>	ADDRESS:
VA.STATE LICENSE NUMBER:	
CLASS / EXPIRATION:	COST ESTIMATE: \$

<b>MECHANICAL CONTRACTOR:</b>			
VA.STATE LICENSE NUMBER:		ADDRESS:	
CLASS / EXPIRATION:			
OPERATING DATA	BTU RATING	FUEL TYPE	COST ESTIMATE: \$

<b>PLUMBING CONTRACTOR:</b>	ADDRESS:
VA. STATE LICENSE NO:	
CLASS / EXPIRATION:	COST ESTIMATE: \$

<b>ELECTRICAL CONTRACTOR:</b>	ADDRESS:
VA. STATE LICENSE:	
CLASS / EXPIRATION:	COST ESTIMATE: \$

## **SHRINK SWELL SOIL DISCLOSURE**

I (WE) HAVE, OR MY (OUR) CONTRACTOR HAS APPLIED FOR A BUILDING PERMIT TO ERECT A BUILDING IN SUSSEX COUNTY, VIRGINIA.

THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION R.401.4 LIST SUSSEX COUNTY ALONG WITH MANY OTHER LOCALITIES IN THE STATE OF VIRGINIA AS HAVING A **20%** OR GREATER POTENTIAL FOR SHRINK SOIL IN THIS LOCALITY.

I (WE) HAVE BEEN INFORMED BY THE SUSSEX COUNTY BUILDING INSPECTIONS DEPARTMENT OF THE POSSIBILITY THAT SHRINK SWELL SOIL MAY EXIST ON MY (OUR) BUILDING SITE. I (WE) HAVE ALSO BEEN ADVISED OF THE NATURE OF THE DAMAGE THE PRESENCE OF SHRINK SWELL SOIL MAY CAUSE TO A BUILDING, TO INCLUDE FOOTING FAILURE, FOUNDATION FAILURE AND RESIDENTIAL STRUCTURAL DAMAGE.

I (WE) HAVE FURTHER BEEN ADVISED BY THE SUSSEX COUNTY BUILDING INSPECTIONS DEPARTMENT THAT I (WE) SHOULD CONSULT A PROFESSIONAL ENGINEER FAMILIAR WITH SHRINK SWELL SOIL TO DESIGN MY (OUR) FOOTING AND FOUNDATION. BY SIGNING THIS DOCUMENT, I (WE) AGREE THAT SUSSEX COUNTY AND/OR ITS OFFICIALS WILL BE HELD HARMLESS FOR ANY AND ALL STRUCTURAL FAILURES OR OTHER DAMAGES I (WE) MY INCURE BECAUSE OF THE PRESENCE OF SHRINK SWELL SOIL SHOULD I (WE) DECIDE TO BUILD ON THE SITE IN QUESTION.

DONE THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_, IN THE COUNTY OF SUSSEX.

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

WITNESS \_\_\_\_\_ DATE \_\_\_\_\_

WITNESS \_\_\_\_\_ DATE \_\_\_\_\_

## PROPERTY OWNER'S AFFIDAVIT

I, \_\_\_\_\_, of \_\_\_\_\_, affirm that I am the owner  
Print Name Present Address  
of a certain tract or parcel of land located at: \_\_\_\_\_ and that I have  
applied for a building permit. I affirm that I am familiar with the prerequisites of Section §54.1-1111 of the Code of  
Virginia, as amended, and I am not subject to licensure as a contractor or subcontractor.

I am fully aware that any permit (building, mechanical, plumbing or electrical) issued to me pursuant to the  
application to which this affidavit is attached is valid only if I, personally perform the work for which the permit(s)  
is/are issued OR am personally supervising my employees, who must have the necessary licensure if required by law  
to perform such work. Allowing a person other than myself, employee(s), who, when required by law, must have the  
necessary licensure to perform such work under my supervision, to perform the work covered by this permit(s) shall  
immediately void the permit(s) and subjects me as well as the non-employee and/ or unlicensed employee, when  
licensure to perform the work is required by law, to possible criminal charges for failure to obtain a building permit.

\_\_\_\_\_  
(Affiant)

Signed and acknowledged by \_\_\_\_\_, in the County of Sussex, VA on the  
\_\_\_\_\_ day of \_\_\_\_\_, 2015, in the presence of the undersigned witness.

My commission expires \_\_\_\_\_.

My registration number is \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

*§54.1-1111 Prerequisites to obtaining building, etc. permit – Any person applying to the building inspector or any other authority of a county, city or town in this Commonwealth, charged with the duty of issuing building or other permits for the construction of any building, highway, sewer or structure, or any removed, grading or improvement shall furnish prior to the issuance of the permit, either (i) satisfactory proof to such inspector or authority that he is duly licensed or certified under the terms of this chapter to carry out or superintend the same, or (ii) file written statement, supported by an affidavit, that he is not subject to licensure or certification as a contractor or subcontractor pursuant to this chapter.*

*It shall be unlawful for the building inspector or other authority to issue or allow the issuance of such permits unless the applicant has furnished his license or certificate number issued pursuant to this chapter or evidence of being exempt from the provisions of this chapter.*

*The building inspector, or other such authority, violating the terms of this section shall be guilty of a Class 3 misdemeanor. (Code 1950, 54-138; 1970, c. 319; 1980, c. 634; 1988, c. 765, 1990 c. 911; 1991, c. 151; 1992, c. 713; 1995, c. 771; 1998, c. 754.)*

*Cross references. As to punishment for Class 3 misdemeanors, see §18.2-11*

*The 1998 amendment, in the first paragraph, in the first sentence, in the clause (ii) inserted “or” following “certification as a contractor,” and deleted “or owner-developer” following “subcontractor.”*

**AGREEMENT IN LIEU OF AN EROSION AND SEDIMENT  
CONTROL PLAN FOR A SINGLE FAMILY DWELLING**

In lieu of an erosion and sediment control plan for the construction of a single family dwelling, I agree to comply with any reasonable requirements determined necessary by the Erosion and Sediment Control Plan Administrator of Sussex County. Such requirements shall be based on the conservation standards contained in Erosion and Sediment Control Ordinance, Chapter 12, Article IV, Sections 12-71 thru 84 of the County Code of Ordinance, and the Virginia Erosion and Sediment Control Law and Regulations, and shall represent the minimum practices necessary to provide adequate control of erosion and sedimentation on or resulting from this project.

At a minimum, any necessary perimeter sediment trapping measures will be installed and all denuded areas on the lot shall be stabilized within seven (7) days of final grading with permanent vegetation or protective ground cover suitable for the time of year. Areas where permanent grade has not been achieved, but which are idle for a period of thirty (30) days or more, shall be stabilized with temporary vegetation or other approved measures.

A construction entrance shall be provided in all cases, the design of which shall be depicted on the site plan for the property and shall be approved by the Erosion and Sediment Control Program Administrator.

I further understand that failure to comply with such requirements, within three (3) working days, following notice by the representatives of Sussex County may result in a citation for violation of the County Code of Ordinance and the Virginia Erosion and Sediment Law and Regulations.

Additional measures specified by the Plan Approving Authority:

---

---

---

Signature of property owner (*required*): \_\_\_\_\_ Date: \_\_\_\_\_

Responsible party for Erosion and Sediment Control (*if different than land or property owner*):

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# **EROSION & SEDIMENTATION SCREENING FORM**

Project: \_\_\_\_\_

E&S Project File #: \_\_\_\_\_

Applicant: \_\_\_\_\_  
(Name)

Building Permit #: \_\_\_\_\_

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Phone: Home/Cell)

This project will require:

☐ grading ☐ excavating ☐ clearing ☐ filling ☐ other \_\_\_\_\_

Purpose: \_\_\_\_\_  
\_\_\_\_\_

Location: \_\_\_\_\_

Area to be disturbed: \_\_\_\_\_ acres; \_\_\_\_\_ sq ft.

Total area of the property: \_\_\_\_\_ acres; \_\_\_\_\_ sq ft.

Is the structure a single family dwelling? ☐ Yes ☐ No

Is it located in a residential subdivision? ☐ Yes ☐ No

If yes, subdivision name: \_\_\_\_\_

=====

## **FOR OFFICE USE ONLY**

Checked by: \_\_\_\_\_

Date: \_\_\_\_\_

- ☐ Requires an Erosion & Sediment Control Plan  
☐ Requires an Agreement in Lieu of an Erosion & Sediment Control Plan  
☐ Exempt (See comments in Purpose for Exempt Activity)

Comments: \_\_\_\_\_  
\_\_\_\_\_

Fee: \$75.00  
Acreage: \_\_\_\_\_  
District: \_\_\_\_\_  
Tax Map Number: \_\_\_\_\_

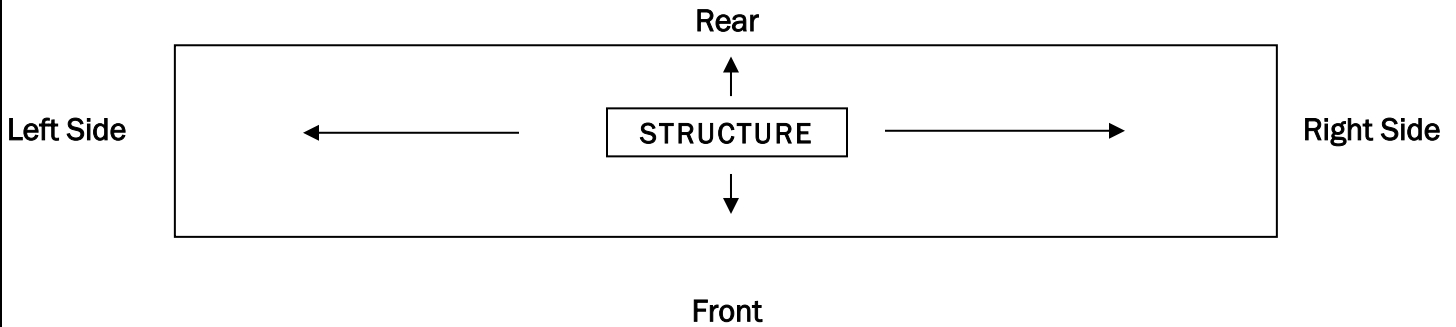


Sussex County Community Development  
Department  
Post Office Box 1397  
20135 Princeton Square  
Sussex, Virginia 23884  
Phone: 434-246-1043  
Fax: 434-246-2175

# Zoning Application

## SITE OR PLOT PLAN- FOR APPLICANT USE

Show Setbacks from all four property lines



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Proposed Use:

\_\_\_\_\_  
{Example: Single Family Dwelling, Single-wide manufactured home, double-wide, modular, etc.}

Setbacks: Front: \_\_\_\_\_ft Back: \_\_\_\_\_ft Right: \_\_\_\_\_ft Left: \_\_\_\_\_ft

## FOR OFFICIAL USE ONLY:

Zoning Classification: \_\_\_\_\_

\_\_\_\_ APPROVED

\_\_\_\_ DENIED

\_\_\_\_\_  
ZONING ADMINISTRATOR

\_\_\_\_\_  
DATE







Sussex County  
Community Development  
Department  
Post Office Box 1397  
20135 Princeton Road  
Sussex, Virginia 23884  
Phone: 434-246-1043  
Fax: 434-246-2175

Fee: \$10.00

# Address Application

Site Information	Applicant Information	Reference Information:
Owner Name:	Name:	Addresses for Adjacent Properties:
Lot Number:	Mailing Address:	Left: _____
Street:	City State Zip:	Right: _____
Parcel Tax Number:	Phone:	Check One: <input type="checkbox"/> Public Water <input type="checkbox"/> Private Water/Septic

## Site Plan:

Each application must include a sketch of the lot showing the building or structure to be addressed. Please attach a copy of the most recent survey plat of the lot or parcel in question.

Signed

Date: